N/2000877

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DIVISION OF CORPORATIONS
12 JUL 13 PM 2: 24

Ps 7/16/1

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: OSCEOLA MIDDLE SCHOOL PTO, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

\$70.00 Filing Fee Certificate of Status \$78.75 Filing Fee & Certified Copy Certified Copy & Certificate ADDITIONAL COPY REQUIRED	Enclosed is an original	and one (1) copy of the A	rticles of Incorporation and	d a check for:
,	\$70.00 Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate

FROM: OSCEOLA MIDDLE SCHOOL PTO, INC.

Name (Printed or typed)

526 S E TUSCAWILLA AVE

Address

OCALA, FLORIDA 34471

City, State & Zip

352-671-7100

Daytime Telephone number

JOHN.MCCOLLUM@MARION.K12.FL.US

E-mail address: (to be used for future annual report notification) Christine.Douglass@marion.kl2.fl.us

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

<u>ARTICLE</u>	I .	<u>NAME</u>

OSCEOLA MIDDLE SCHOOL PTO, INC.

The name of the co	rporation shall be:	12 JUL 13 PM 2: 24
ARTICLE II	PRINCIPAL OFFICE	12 JUL 13 FT 2: 24
	Principal street address	Mailing address, if different is:
	526 S E TUSCAWILLA AVE	
	OCALA, FLORIDA 34471	
RTICLE III	PURPOSE	
	hich the corporation is organized is:	
A. To promote the w B. To raise the stand C. To bring into close youth.	elfare of children and youth in home, school, and the dard of home life. er relationship the home and the school, that paren	ne community. Its and teachers may cooperate intelligently in the education of children and fforts as will secure for all children and youth the highest advantages of education
RTICLE IV		er in which the directors are elected and appointed:
The Board of Directors selected by the teacher ARTICLE V	shall consist of the officers of the organization, the chairman. The chairman of standing committees shall be selected to INITIAL OFFICERS AND/OR DIRECTION OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF T	an of standing committee, the principal or his/her representatives, a teacher representative by the members at least 48 hours in advance and be open to all members in good standing.
		Name and Title:
Address:	1234 S E 17th Ave	
	Ocala, FL 34471	
Name and T	via Joan Channell, Tracquirer	Name and Title:
Address:	1255 N E 17th Rd	
Address:	Ocala, FL 34470	
	Ocala, FL 34470	<u> </u>
Name and Ti	tle: Stephanie Albright, Secretary	Name and Title:
Address:	4361 S E 6th Ave	Address:
	Ocala, FL 34480	
ARTICLE VI	REGISTERED AGENT	
	rida street address (P.O. Box NOT acceptable	e) of the registered agent is:
Name:	Susan Hebert, President	
Address:	1234 S E 17th Ave.	
	Ocala, FL 34471	
		·
RTICLE VII	INCORPORATOR	
	Iress of the Incorporator is: Joan Chappell, Treasurer	
Name:		
Address:	1255 N E 17th Rd	
	Ocala, FL 34470	<u>—</u>
Tanda a bassas	-d	and the state of t
		process for the above stated corporation at the place designated in thit istered agent and agree to act in this capacity
Misse	andlebelst	7/11/12
	Required Signature of Registered Age	nt . Date
	ment and affirm that the facts stated herein a of State constitutes a third degree felony as pr	re true. I am aware that any false information submitted in a documen
, que Depuriment	of State Constitutes a intra degree Jetony as pr	омией joi in 3.017.133, F.S.
plan	ropper	
1/	Required Signature of Incorpora	itor / Date